Public Health Then and Now

Adolf Meyer and Mental Hygiene: An Ideal for Public Health

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On October 21, 1952, groundbreaking ceremonies for a new residential school for children at the Institute for Juvenile Research in Chicago brought together Ethel Dummer and Dr. William Healy, two people who had devoted a lifetime of personal concern for the mental health of children.[1] Healy, who had been the first director of the Institute, now, at 85 years, said that the day's groundbreaking ceremony was "really a symbol of faith in an idea" and that the new building would be "dedicated to the furtherance of that idea." It represented, therefore, an "unbroken continuance of the faith shown by Julia Lathrop and Mrs. Dummer and Judge Merritt W. Pinckney and their advisors when they established the first of all clinics for children's behavior problems here in Chicago in 1909."[1]

When Ethel Dummer spoke at the ceremony, she remembered the years when the concern for the mental and physical health of children was dominant in the thoughts and activities of many individuals. She spoke of William James, Professor of Psychology at Harvard University, who had suggested that the child be studied as a unique individual, not as a laboratory experiment; of Dr. Adolf Meyer, whose contributions to the idea of mental hygiene had helped to lay the foundations of the movement and its evolvement into national recognition; and of Jane Addams and Julia Lathrop, "an early pioneer in mental hygiene" whose wisdom had seen the need for a physician in the juvenile court.[1]

The commitment of laymen to the idea of mental hygiene and the needs of children was important, as Dr. Healy had pointed out, but if the idea were to mean seeking causes for behavior, the endorsements and contributions of professionally trained men and women were imperative. When one of the founders, Baltimore psychiatrist Adolf Meyer, recalled the birth of the movement, he described the "balance of forces" that supported the new endeavor as a "mixture of humanitarian, fiscal and medical factors."[2] The balance was difficult to maintain, however, for there was at the outset a demand from the lay members of the movement which, Meyer said, exceeded the scientific contributions of those in the medical field.[3] The main difficulty encountered, he said, was that mental hygiene, like psychiatry, was homeless, "strangely isolated from scientific efforts."[4] Both had fallen down between the dogmatists of psychology, philosophy, and religion on the one hand and the equally dogmatic workers in the natural sciences and medicine on the other.[5]

The concept of mental hygiene broadened in the early years of the twentieth century not only because of the social reformers whose charitable concern for children had led them into impoverished homes, back alleys, and city jails, but because a few psychiatrists like Meyer sought to help mankind find a "new social conscience" and to feel again his own strength for creative activity.[6] Meyer believed that industrialization and urbanization were not only threats to man's existence as an individual but were disintegrating influences on the realization of his "potential for continuous adaptability and constructive activity."[7] After 1900, with less and less opportunity for self-fulfillment in individual enterprise and more and more time for leisure, a gap developed between the resourceful, self-confident individual and the passive, self-indulgent man. The pride that came from self-employment and using one's hands to carve a future was challenged by hours of meaningless machine labor. If man were studied as a biological unit of life—that is, within the context of "life situations"—the disintegrating effects could be effectively opposed, Meyer said. What man needed was a "biologically sound idealism": a blending of the interactions of the organic processes within each individual, the mutuality of relationships within groups of men, and the interdependence among the faiths and hopes which men held in the "ruler or the rules of the universe."[8] Human problems have always needed answers, he stated, but answers that kept man together in his mind, body and soul; this the nineteenth century had not done.

Meyer compared the growth of the idea of mental hygiene with the development of psychiatry; for psychiatry, with the science of biology as its base, gave to man the sense of "integration" which he needed. It provided, too, the dynamic base for mental hygiene to develop its programs of prevention of mental ill-health and the preservation of vitality and health in the responses of all people.[9] Psychiatry, born

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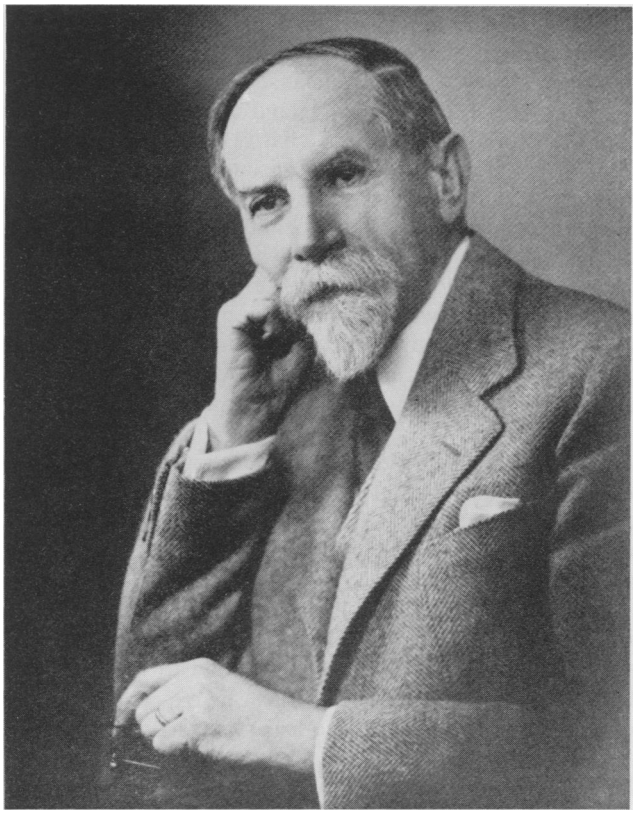

Portrait of Adolf Meyer by Backrach in Alfred Lief, *The Commonsense Psychiatry of Dr. Adolf Meyer*. New York: McGraw-Hill, 1948.

of autopsies, insanity and asylums, description and classification, had developed slowly into a science which dealt with the living in a dynamic way and used the biological sciences in its daily work with patients within the context of their lives.[10] Similarly, mental hygiene had to grow through stages, he said. The newer ideas in mental hygiene sprang from the child study movement and proceeded, by 1903, to the study of hospital patients and keeping histories of all their responses to life, to after-care service and active social work for the patient and his family. By 1908, Meyer wrote, everything tended toward "a reaching out into the community" and thus a "broader conception of mental hygiene could be made."[11]

When Clifford Beers met with 13 men and women in New Haven, Connecticut in May 1908, to organize the first society for mental hygiene, knowledge of his commitment to a social application of mental hygiene and to its comprehensive meaning had preceded him. His book, *A Mind That Found Itself*, had recounted his life as a patient in a mental institution and raised a personal tragedy to the level of an active social concern. Both Beers and his book had received the endorsement of Adolf Meyer, William James, Julia Lathrop, and William Welsh, professor of medicine at the Johns Hopkins Hospital, School of Medicine.[12] Years later they remembered Beers for his farsighted plans in bringing together men and women from many professions to help span the gaps between psychiatry and medicine, the clinic and the laboratory, the humanities and science. "He was a sensitized layman," Adolf Meyer recalled, "destined to bring physician, psychiatrist and patient together."[10, 13] Nine months after the meeting in New Haven, when another group of men and women met at the Hotel Manhattan in New York City, the aims of Beers and the first society for mental hygiene expanded into national proportions.

Adolf Meyer, Director of the Phipps Psychiatric Clinic at the Johns Hopkins Hospital, Baltimore, accepted Beers' aim of making mental hygiene the social agent of psychiatry. He knew that achieving this goal meant that many professions must cooperate and that medical research must provide the scientific base which the mental hygiene movement needed. As an attendant at the organizational meetings of the National Committee for Mental Hygiene, he was interested in insuring for mental hygiene this scientific base. He believed that biology, the science of life, was that base, for it was common to both psychiatry and to mental hygiene. When biology became the foundation of psychiatry, he said, it was possible for psychiatrists to study man as an integrated whole; he was more than the summation of organic parts, more than a bundle of distinct reactions to the environment.[14] When biology became the base for mental hygiene, it performed a similar function. Although mental hygienists concentrated on preventing mental illness and preserving good mental health, and psychiatrists on treating illness, Meyer stated, both dealt with the "bio-dynamics of a person," that is, with his tendencies and the events of his life.[15] Both psychiatry and mental hygiene, he continued, progressed from passive observation of individuals to active programs of intervention in social problems.[16]

To the New York Academy of Medicine in 1931, Meyer recalled the people and events that had influenced his thinking in biological terms. As a teenager in Switzerland, he had wished to combine philosophy and psychology to determine what "science might have to say about the soul."[17] Neither hypnotism nor introspection provided answers, he felt, for they studied the individual's psyche apart from the influence stemming from events and relations in his environment. Inspired by Charles Darwin, William James, Charles Pierce, John Dewey, and G. Stanley Hall, Meyer came to believe that biology was the science that "cast off the dogmatic dualism of mind and body"; that biology focused on man's response to all the influences in his environment, past and present. Childhood experiences were important only in the context of home, school, and community. Meyer called this context a "life situation" and an individual within the situation, an "integrated life."[18] The tropisms of plants and the responses of animals to their environment were complex physical and chemical reactions to events in the natural world. Similarly, a human being's reactions to his experiences could be known only by observing all the features of his life.[19]

Meyer began his work in America at the Eastern Illinois Hospital for Insane in Kankakee. Its proximity to Hull House gave him opportunities to understand even better the influence of environment on human lives. He acknowledged his debt to Jane Addams and other workers at Hull House, for in emphasizing that play and industry developed feelings

of success and accomplishment, they showed concern for the physical and emotional health of old and young alike.[20] Years later, he recalled that when Julia Lathrop, representing the Illinois State Board of Charities and Corrections, had visited him in 1892 and asked him to share his knowledge about social service and child welfare, there began a series of opportunities for each to aid the work of the other.[21]

In Worcester, Massachusetts, where he went in 1896, Meyer expanded his belief in the biological approach to the study of individuals. He taught psychiatry at Clark University where courses in this field had already been started in the 1890's by President Hall.[22] At Worcester State Hospital, Meyer introduced his students to the necessity of "studying the disease as found." In the lives of every person, he believed, were answers to the causes of their illnesses and clues leading to their renewed health. Here he began his biographical or "life-story" approach to studying people.[22]

After 1902, the New York State Hospital on Ward's Island gave Meyer the opportunity to practice psychiatry in the context of social work. He instituted after-care of patients released from the hospital which meant treating them as members of family and community and using the services of social workers.[23]

At the opening of the Phipps Psychiatric Clinic at the Johns Hopkins Hospital in April 1913, Meyer made clear that besides being a medical problem, mental hygiene was a civic responsibility. As its first director, he explained that the hope of the clinic lay in its contribution to the mental health of Baltimore through its schools, courts, and wherever mental hygiene was advanced. "A right balance between individualism and civic solidarity" must be maintained in dealing with health problems, he declared.[24] Eight years later, he stated the goal of his clinic to be a "proper balance of work and play and satisfaction in family and social groups."[25] In a summary of his work at the end of his first year at the clinic, he said that the great lesson for the public was that "no one is fit to be absolutely independent"; all are "social beings and members of a family and a community."[26] He considered one of his best contributions to the "problem of remedial and preventive psychiatry" was bringing state institutions "from their isolation in the eyes of public and profession" into "active participation in the welfare of the community."[27] With this goal in mind, he instructed his medical students to be "inspired by the courage of common sense," so that as psychiatrically-trained physicians they might become part of a school's health program.[28] They could assist teachers in preparing what Meyer called life-charts, which showed the reactions of individuals to the events of life. These charts, Meyer said, would not only help teachers better understand themselves but would encourage their utilizing home and community "for information . . . concerning the life history of the child."[29] In this way, he declared, probably "the greatest function of a public school" might be fulfilled.[30]

The art of building a community was an intricate one in which psychiatrists could play a vital role as leaders in what Meyer called mental hygiene districts. Psychiatrists would not scour the community for misdeeds but teach people how to bring "constructive tolerance" to all individuals. At work in these mental hygiene districts would be a specially-trained physician "acceptable as a school physician" but not in "competition with local physicians," and a few helpers acting as a catalyst for "friendship and cooperation" between teachers, playground workers, charity organizations, ministers, and physicians. "Without legislation . . . and in a quiet and inconspicuous manner," they would be "helpers of individuals and families." Using "local facilities and sound performance," physicians and aids would transplant the principles of mental hygiene from posters and letterheads to the soil of "sound knowledge and actual performance" where, he said, "science and practical life join hands."[31] Although Meyer's plans did not materialize, they represented the extent of his belief in a psychiatrist's responsibility for public health.

As early as 1895, Meyer asked questions about the methods which teachers used in classrooms. The use of homework seemed to him a "considerable danger," he said, for it often created "the martyr spirit" and presented the "illusion that learning by heart exercised the memory." He also asked, "When shall a child be allowed after sickness to take up classes again?" and "What measure shall be taken to prevent overwork . . . ?"[32] When he spoke to the American School Hygiene Association in 1908, he expressed concern for the emphasis placed on acquiring knowledge without the knowledge of "doing things" and getting "ready for doing things" and on "cramming the pupil with the subjects of a conventional curriculum."[33] To those attending the National Conference of Charities and Corrections in 1915, he said, teach children "what they *can* do, in work, recreation and rest" instead of "making them half-obedient servants of a system" which often killed "the native interests." Teachers should "get over the notion that only the bad pupil needs attention," he cautioned, for the "so-called good pupil is very much more likely to be endangered by mental disease and nervous states than the frankly and outspokenly bad and happy-go-lucky child."[31]

By the next decade, the ability of communities to work selflessly for the welfare of each other seemed feeble. In a letter to Ethel Dummer, Meyer described these years as a "period of so many turmoils that it is hard to find any bearing."[34] Americans were caught up in production, construction, and consumption. Women found success in gaining the vote and profitable employment. Psychologist John B. Watson told parents not to hug their children, kiss them, or let them sit on their laps.[35] The tabloid appeared in 1919 with the publication of the New York *Daily News*, and after the war the motion picture industry became one of the ten big enterprises in the nation.[36] When Elmer Rice wrote his play, "The Adding Machine" in 1923, he described the growing mechanization of man and the loss of individuality in the character of Mr. Zero, the bookkeeper. "You're a failure, Zero, a failure. A waste product . . . the raw material of slums and wars—the ready prey of the first jingo or demogogue or political adventurer who takes the trouble to play upon your ignorance and credulity and provincialism."[37] Children reflected this new materialism. Youth today learn their lessons in mills and pocket their earnings, wrote Arthur Pound in the *Atlantic* in 1921. With their money, they buy

"pleasure, companions and raiment . . . and become our bad men of the winter."[38] Viewing all this, Meyer spoke about mental health and mechanization before the Progressive Education Association meeting in 1922. Mental hygiene based on psychiatry and biology was an answer to "mechanistic determinism" in psychology, to mechanistic family life and to a machine-like nonvariable course of reflexes, he said.[39]

When Meyer referred to Sigmund Freud and his contributions to psychoanalytic theory, therefore, he found him valuable for broadening and humanizing the concept of mind but deficient in contributions to a "social formulation" of life.[40] Social justice, built on self-love and the envy and jealousy of childhood was an expression of adults who denied to themselves and others those things which they wished them to do without, Freud explained.[41] In Meyer's mind, Freud was concerned with transference and free associations in connection with dream analysis which released repressed infantile sexual wishes. These, Meyer declared, might be "fascinating and stimulating" but were "questionable obsessions" which belittled the personality.[42] He preferred to emphasize factors and functions that could be "mentioned, used and modified,"[43] and which helped to form a new "social conscience," a "morality of science" and a harmony of "idealism and reality."[44] Meyer's reconstruction of man's behavior was wholly individualized, for, as he wrote, the best reading of man was not a study of the abnormal or the "out-croppings of the repressed unconscious and compelling urgency of the sex instinct" but from a common sense analysis of the facts of his life as they were.[5] These facts included man's personal and spiritual life and the values by which he lived.[6, 16]

To his students in psychiatry at the Johns Hopkins Hospital School of Medicine and, in later years, to those attending the Thomas Salmon Memorial Lectures in New York in 1931, Meyer declared that there were questions which medical scientists, educators, and those "concerned for the values by which man must live" needed to answer. "How can we mesh the three-score years and ten with the seriousness of eternity? How can we harmonize reality with the dreaming of dreams?"[45] In times of complexity of formulation and proliferation of facts, "finding the common ground for understanding human problems was even more difficult," he wrote.[45] Two years later, to the Mental Hygiene Division of the Illinois Conference on Public Welfare, Meyer declared that science consisted of studying spontaneity which meant studying individuals and asking, "Why?"[46] A science of life without respect for the inclusiveness and creativeness of the individual and the group "was neither a safe leader nor follower."[47] Social workers, educators, and physicians, he continued, needed to keep in mind that individuals acted not only out of conflict and pain or from "an unconscious or mystical force" but out of a natural spontaneity, uncomplicated as human growth, harmoniously integrated, uniquely personal.[48]

Questions and considerations such as these helped to form Meyer's definition of mental hygiene as well as describe his whole approach to life. Meyer's ideas, therefore, did not seem to appear in a logical order but in response to events as he observed them and represent the subjectivity of content and vagueness of language which physicians criticized.

Bronson Crowthers summarized the points of criticism when he wrote, *A Pediatrician in Search of Mental Hygiene* in 1937. He believed that mental hygiene lost its medical status as a subdivision of psychiatry almost as soon as it was born by leaving most of the doctors at one side and developing into a "semi-sociological enterprize" which accepted as experts, judges, educators, and sociologists.[49]

Psychiatry and pediatrics had developed in isolation, and mental hygiene soon required the contributions of both sciences. In their isolation, many pediatricians and psychiatrists developed a defensiveness which made them unable to contribute. They detected competitors among mental hygienists believing they betrayed the objectivity of science. Instead of studying mental and physical disease alone, mental hygienists emphasized prevention of illness and preservation of health. In so doing, they studied all the influences in children's lives and, perhaps even worse, included teachers and parents in their programs.

Adolf Meyer made biology the assimilator of both viewpoints by pointing out that it emphasized all the facts of child-life in a natural setting. It became through them the scientific base best suited to the meaning of mental hygiene. In contrast to a simply "curative" interpretation of mental hygiene, therefore, Meyer emphasized the creative, preventive, and humanitarian aspects without the restrictions which a purely psychiatric interpretation or physical diagnosis might have produced. "The freer the emphasis can be of reminders of pathology and therapy," Meyer had said, the closer they were "to what they wished to offer to practical life as mental hygiene, personality and group guidance."[4] He did not rely exclusively on the esoteric unconscious motives of human behavior but stressed the importance of viewing each child's life as "an open book." He knew from experience that society contributed to the health of its children by providing the life history of each one. Teachers and parents were part of this history, therefore they needed to review their own lives and seek advice from competent authorities to better understand themselves and their children.[50] Through the work of Meyer, the idea of mental hygiene became an ideal of public health, never isolated from the realistic needs of children and adults.

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8. Ibid., 24–25.
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Editor's Note: *Due to the unusual nature and completeness of the author's Bibliography, we are publishing it as submitted, realizing that it does not follow the usual format of the Journal for articles and Public Health Briefs. The Journal is grateful to Dr. Dreyer for her contribution to this Journal feature, which is regularly written and/or edited by Dr. George Rosen.*

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